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ABSTRACT

This issue focuses on the Education for All Handicapped Children Act, P.L. 94-142, and its impact on the role of school social workers, including relationships with students, school personnel, parents, and community service agencies. Other articles address the following areas of concern: (1) truancy and due process; (2) play therapy; (3) issues of female adolescence; (4) Title II of the Social Security Act and subsequent implications for school social workers; and (5) resources for the hearing impaired. Book reviews, book notes, film reviews, and anncuncements are also presented. (HLM)

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ILLINOIS ASSOCIATION OF SCHOOL SOCIAL WORKERS

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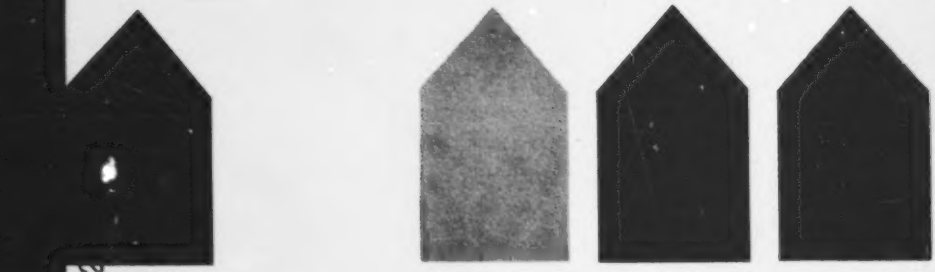

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EDITORIAL

While school social workers assume that parental involvement in their children's education is beneficial, the schools have traditionally functioned to keep parents away. The question should be asked is the involvement of parents in their child's education an aid to their academic achievement? Validating the assumption that parental involvement has a positive effect on school achievement is a research study conducted at John Hopkins University by Edward L. Mcdill, Leo C. Rigsby and Edmund D. Meyers Jr. entitled, "Educational Climates of High Schools: Their Effects and Sources." Although the purpose of the study was to measure school climate and its effect on student achievement and career plans, one factor the study also considered was the effect of parental involvement in the educational program of the school. It is significant that the major finding stated by the study was that school climate effected student achievement and career plans to a moderate degree but that "The critical factor in explaining the impact of the high school environment on the achievement and educational aspirations of students is the degree of parental and community interest in quality education." Although research in education seems often ignored, progressive policy will reflect research findings. This study's findings imply that parents and schools should work more closely together and that parents should be involved in their children's education. It could be hypothesized that the more parental involvement in the educational institution the greater the success of their children and the greater the success of the educational system. Hopefully then, school boards, individual states and the federal government will build policy and programs to reflect the direction towards parental involvement indicated by research.

P.L. 94-142, The Education for All Handicapped Act, is an example of legislation that recognizes the importance of parental involvement in a child's education. Mandating parental participation in the development of an "Individualized Educational Plan" (IEP) forces schools to include parents in the formulation of policy and program. The implications for social workers in school are obvious since they are traditionally involved with parents and their children. And, the school social work position gains repute as parental involvement becomes more meaningful. School social workers must become advocates for parents by working with them toward mutual and congruent goal setting in behalf of their child. Also, the task of the social worker is to work with the school to utilize information obtained from the parent and to include parents in a regular and meaningful way in the educational program of their child. Moreover, a final

responsibility includes coordinating resources and needs when a school is unable to provide a program for the handicapped child. These tasks are the focus of three journal articles, "The School Social Worker and P.L. 94-142", P.L. 94-142: The Parent, the School and the Community Service Agency," and in "P.L. 94-142: Boon or Bust."

The removal of social work services from the school becomes increasingly remote as the parental role in the educational process is recognized, and mandated by law and the school's responsiblity to educate all children is confirmed. The social work service is a key ingredient to a successful educational institution's efforts to educate all.

Jeanne Everttt

THE SCHOOL SOCIAL WORKER AND P.L. 94-142

Robert Constable
Marguerite Tiefenthal

The Education for All Handicapped Children Act, P.L. 94-142, is perhaps the most important piece of school legislation to be passed since the Elementary and Secondary Education Act. A "Bill of Rights for the handicapped", the act will have profound effects on American education and on the provision of school social work services. The passage of 94-142 places school social workers at an historic juncture with outcome undetermined as of yet. To move along the path suggested by the law is to accommodate change and, in return, to contribute substantially to public education. To ignore its challenge is to elect a position of marginality in American education and of gradual replacement of typical school social work functions by other professionals in the schools.

The right to an education for all children, clearly established in court decisions in the early 1970's, was enunciated in the Vocational Rehabilitation Act of 1973, section 504, but is most fully implemented in 94-142. The act implements the right to a free, appropriate, public education for every child regardless of handicap, and spells out the accountability and procedural safeguards which will ensure this right. The act is quite specific that this education be appropriate, take place in a least restrictive environment with procedural safeguards and with a non-discriminatory evaluation. With a complex appeal structure, which could eventuate in the Office of Civil Rights if unsatisfied, the act brings parents in as important arbiters of the child's rights. A key concept of the law is that education for handicapped children must be related to their individual needs. The components of an educational program for each child will be decided at a multi-disciplinary staffing at which a maximum level of involvement of parent or guardian is mandated.[1]

The act requires a written individualized educational program to be developed for every handicapped child who requires special education and related services. The individualized education program, or I.E.P., constitutes an agreement between representatives of the school system and parents which states what will be provided the child, who will provide it, and the effective dates. P.L. 94-142, The Education for All Handicapped Children Act.

89 Stat. 776, describes the individualized educational program as:

> A written statement for each handicapped child developed in any meeting by a representative of the local educational agency or an intermediate educational unit who shall be qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of handicapped children, the teacher, the parents or guardians of such child, and, whenever appropriate, such child, which statement shall include (A) a statement of the present levels of educational performance of such child, (B) a statement of annual goals, including short-term instructional objectives, (C) a statement of the specific educational services to be provided to such child, and the extent to which such child will be able to participate in regular educational programs, (D) the projected date for initiation and anticipated duration of such services, and appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether instructional objectives are being achieved.

The individualized educational program (I.E.P.) thus becomes a central management tool for ensuring accountability and compliance with the purposes of the act. The I.E.P. is more than simply a plan. It is a statement of which resources will actually be provided a child. It is possible that the school district may not have the resources to provide an appropriate education for the child. If this were the case, the school would be obligated to purchase the needed educational services from outside. In this case "resources" may mean more than what the school is able to offer within its walls.

Theoretically a state need not receive funds under 94-142 and thus agree to comply with its provisions. However, the implementation of the regulations of the Vocational Rehabilitation Act of 1973 gives school districts the option of adopting such policies voluntarily or being forced to do so by intervention of the courts. If states do not comply with the mandates of the Vocational Rehabilitation Act of 1973 regarding the handicapped, all federal funds may be cut off. To date almost all states have developed a plan for compliance with the law. All states submitting a plan are to be in full compliance by September 1, 1978. In return the federal government will fund excess costs to the extent of a percentage of the national average per pupil expenditure. The percentage, 5 per cent for F.Y. 1978, increased to 15 per cent in 1979 of which 12 per cent was financed, to 20 per cent for F.Y. 1980, 30 per cent for F.Y. 1981 and 40 per cent for F.Y. 1982 and thereafter.

The act will have a profound effect on social work as it is practiced in the public schools, both in regular and special education. The act in many ways is dictating precisely what school social workers have struggled for throughout many years. It makes an appropriate education for handicapped children a matter of right, not privilege. It

mandates a maximum level of parental participation in the education of the child and in resource decisions regarding the child. In its due process provisions it creates a child advocacy function which whether fulfilled within or outside the school system, will be a fixture for many years to come. It mandates a multidisciplinary team approach to the education of the child. It creates a concept of service delivery that is broader than any one profession. It potentially places the school as the center of service integration, coordination and even funding for services to handicapped children since the school supervises the education of children regardless of the site of learning.[3]

In order to be eligible for 94-142 funding the "problem" must relate to the categories of handicaps written into the regulations. These are:

> ....The term 'handicapped children' means those children evaluated as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally distrubed, orthopedically impaired, other health impaired, deaf-blind, multihandicapped, or as having specific learning disabilities, who because of these impairments need special education and related services.[3]

School social work is defined in the law as a "related service." Related services are those additional services necessary in order for the child to benefit from special educational instruction. Special education is that specially designed instruction to meet the child's educational needs. The definition makes it very clear that "related services" draw their legitimacy from the extent to which they make education possible for the child, not from a general desirability of having social services. School social work is thus placed in the position where it must define its legitimacy in relation to the process of education. Although controversial, in some states, such as Illinois, school social work is already legally considered a special education service through the school code and thus as "special education" may not need to be considered simply a "related service." The distinction is crucial since otherwise a child who is receiving "only" a school social work service would not qualify to be counted for the purposes of 94-142 reimbursement.

To explicate this further: Not all children who are disabled are considered handicapped. Only those who, by reason of that disability require special education and related services are defined as handicapped. Social work is considered a related service but under some school codes is defined as a special educational service. In either case, but particularly as a "related service," the connection with education must be demonstrable.

However, for all of the rehetoric, the act could seriously miscarry. It could be circumvented in its purposes by an all-too familiar ritualism and corner-cutting so that, rather than a step forward, it could ultimately curtail the provision of services except for a few covered populations.[4] It could possibly result in labelling processes which deepen the gulf between handicapped children and

non-handicapped. Its ultimate result could be nothing but an increase in paperwork. The law faces massive implementation shortfall at the hands of persons who have little preparation to understand or carry out its mandates.[5] If implementation is to be successful, school social work is an excellent position in many districts to play a central role in making the educational reforms envisaged in 94-142 possible--perhaps more central than any other profession in the schools.

The Education for All Handicapped Children Act does not replace the traditional skills of interviewing, diagnosis, consultation, advocacy, etc. which school social workers have drawn upon from time immemorial. It, in effect, calls upon their use in a very specific way and places even more importance on their use to carry out the explicit purposes of the law. In this respect it could create profound changes in school social work practice as it is viewed. What the school is now attempting goes directly to the heart of the social work matter. The school now has even greater cause to use social work skills than ever before.

The mandated components of 94-142, each in its own way, will accomplish a revolution in education and also in social work practice in the schools. The impact of these mandated components will be felt first of all in changes of role for the school social worker, which stands to be greatly expanded. Along with this impact on school social work practice is a parallel change in patterns of service delivery in the schools.

Changes in the role of the school social worker and in school social work practice are bound to stem from:

The due process protections governing decisions on objectives and resources.

The shift in decision making and accountability toward the multidisciplinary team.

The legal involvement of parents with the setting of goals and objectives and ultimately as team collaborators.

The demand to identify goals and objectives in a clear enough manner to be readily understood and assessed.

The demand for a least restrictive educational environment for the child.

Effective school social work practice has always espoused teamwork concepts, parental involvement, protection of children's rights and specificity of objectives. Through direct, and often hard experience in the schools, each one of these points become highly developed skills. In one sense they pose nothing new. In another sense they are revolutionary because in the world of the school, often semi-closed, fragmented, specialized and hierarchical, none of these goals was entirely feasible or reachable. Not that all of this will change at once. What will change is the due process accountability to the team and to the parent, but that in itself can accomplish major changes in programs and in persons who make the handicapped child's education possible.

THE DUE PROCESS PROTECTIONS GOVERNING DECISIONS ON OBJECTIVES AND RESOURCES

This is perhaps the most fundamental change of the act. An appropriate, free, public education is now a matter of right, not privilege. For handicapped children, the implications of this change are comparable to the effect of the school attendance laws on American secondary education at the turn of the century. In order to carry out the intent of the law the social worker is inevitably placed in the position of becoming a child advocate. The advocate role will involve a shifting of the focus of the social worker to include the child's entitlements to certain appropriate resources as well as dealing with individual children's problems in the school. The role will doubtless involve some conflict in that the special education providers may resist and parents may hesitate to avail themselves of the provisions of the law.

THE SHIFT IN DECISION MAKING AND ACCOUNTABILITY TOWARD A MULTI-DISCIPLINARY TEAM

The multidisciplinary team concept balances somewhat the growing specialization of school roles and their isolation one from another. Specialization continues but in a framework of common goals, integrated decision making and understanding of other roles. The authority structure of the school, with principal being the last word, now has a new set of ingredients. Social work practitioners face the prospect either of becoming an integral part of this team or of accepting marginality and perhaps of even being programmed out. School social work practice can no longer be seen as a solo but rather as a harmony of specialties. Service is delivered through the team, not through individuals, with mutual reinforcement of roles. This creates a new level of focus of social work practice -- on the team itself, to resolve its internal problems, to maximize its functioning in the interests of the child.

PARENTAL INVOLVEMENT IN THE FORMULATION OF GOALS AND OBJECTIVES

The implications of mandated parental involvement on the team go to the heart of long and deeply held convictions about the need for a better relationship between home and school. No profession working in the school has had as much experience and contact with parents as the school social worker. However, the traditional concept of liaison undergoes a change when the parent becomes a collaborator with oversight and due process protection regarding goals, objectives and resources. The direction of accountability shifts toward the parent and the role of the educator shifts from "interpretation" of what the professional opinion had previously decided to one of seeking concensus between home and school. The role which emerges for parents is that of collaborators in maximizing the conditions necessary for the social and educational development of the child.

Parents of the handicapped, known to be quite involved and concerned, will no doubt use this opening to the fullest and, with established communication networks, be quite sophisticated in asking for the best for their children. Such an alliance with parents could lead to a deepening support of the school by parents of handicapped children. It is up to school personnel to accept this potential alliance in the interests of the child or to reject it. However, with the legal protection of due process and the shared sophistication of such parents, the costs of rejection will be prohibitive. The enhanced role of parents as genuine collaborators and partners creates a new type of relationship and ultimately implies a different style of school social work practice.

THE DEMAND THAT GOALS AND OBJECTIVES BE IDENTIFIED, CLEARLY, COLLABORATIVELY AND IN ASSESSABLE FORM

While the demand that goals and objectives be clearly identified may seem fairly simple, it is perhaps the most individually challenging provision of the act. The task of identification and clarification of goals and objectives is one which the entire profession is struggling with. Goals and objectives cannot be identified in general terms. They cannot be simply what is planned. They must be identified in terms of what terminal behaviors of the child are expected -- of outcomes.

Another dimension to the definition of outcomes comes from the position of social work in the educational setting itself. The justification for social work intervention is primarily related to its ability to help the school accomplish its educational function. This function, which has been assumed by American education, is quite clearly spelled out by the supreme court in Brown vs the Board of Education.

> If education is a principle instrument in helping the child to adjust normally to his environment, it is doubtful that any child may reasonably be expected to succeed in life if he is denied the opportunity of an education. The opportunity of an education, where the state has undertaken to provide it to any , is a right which must be made available to all on equal terms. [6]

Assuming that the definition of "education" used, particularly in the case of handicapped children, is broader than the purely academic and involves a preparation for life, then the strongest argument for school social work is that it make education possible. The development of social skills--social acceptance, responsibility, self control, self concept, general behavior and self help skills are translated into educational goals for handicapped children.[7] They are not solely the private province of the social worker. While they need to be shared by the team, the social worker will make a most significant contribution to this area. In this respect, the social worker must assuredly become an educator.

The goals and objectives where the social worker has a contribution are primie facie educational goals, albeit educational goals which could not be achieved without professional social work involvement with child, parents, teacher and outside agencies. This demand could have a profoundly beneficial effect on school social work practice.

THE LEAST RESTRICTIVE ALTERNATIVE ENVIRONMENT

One of the most well known aspects of 94-142 is that of the "least restrictive alternative." The provision in the act assures that, to the

> ...maximum extent appropriate, handicapped children, including children in public and private institutions or other care facilities, are educated with children who are not handicapped, and that special classes, separate schooling, or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

This portion of P.L. 94-142, The Education For All Handicapped Children, 89 Stat. 781, validates "mainstreaming."

The institution of the least restrictive alternative has three major implications for the school social worker. First and foremost, the isolation and stigma of handicapped children is to be minimized whenever possible. The separation of special education from regular education will be less easily maintained. In school systems where the social worker had primarily served special education programs, the role of the social worker will need to be rethought in relation both to special and to regular education.

Secondly, the social worker can make an important contribution to the design of a least restrictive alternative. As an expert in human social functioning, the social worker has a unique background to assess the predicted level of functioning in the different mainstreamed environments available and to make recommendations regarding which services will be needed to support such a placement.

Finally, as the child moves into a mainstreamed, and thus less protective environment, the school social worker's clinical skills will be needed by the child, by parents and by teachers. This is something that the school social worker has been explicitly trained to do. The institution of the least restrictive alternative will of necessity make greater demands upon these skills and create a new utilization for the social work role.

THE SCHOOL AS A SERVICE INTEGRATOR

The impact of 94-142 on the role of the social worker, outlined above, is paralleled by a forthcoming change in the patterns of service

delivery to children in schools. The individualized educational program is ultimately and essentially a statement of resources necessary to carry out a plan. Availability of these resources will probably be limited and considerable ingenuity may be needed to plan appropriately. It is likely that coordination may need to be done with outside educational resources, and in some cases with the school system paying for these services. These outside educational services, the result of a recommendation of the I.E.P. staffing, would have some accountability to the parents and to the multidisciplinary team where the recommendation originated. The social worker may thus take on some responsibility for coordination, service integration and monitoring of a number of concrete and nontangible services. Any purchase of service of the school may bring funding, budgeting and accountability issues directly to the review of the school social worker as well as the school administrative staff who have traditionally been involved with such monitoring.

A further and larger implication stems from the right of every handicapped child to a free, appropriate, public education. The law promises to generate a shift away from institutional care and toward meeting the needs of children while living in the community. The demands for service integration by the school, inherent in what is now a policy statement for all handicapped children, are truly enormous in potential. The shift in provision of services to the handicapped, as a right, not as a privilege, and as an expected part of modern life, may be evident.

The development of public educational services for all handicapped children necessitates a parallel development of supportive systems to sustain the child and his parents in such a community placement. The necessary and parallel development of these systems will hopefully involve both public and voluntary sectors, with reliance on informal and private resources as well as the public sector. The potential costs of a totally public service-delivery system could be astronomical and may provide an upper limit to service provision. The key to the system's viability is a melding of public and private resources in the best interests of the child.

A corrolary and difficult issue is the impact of the act on regular education and on the development of school social work services to non-covered populations. The act could result in increased labelling of children as some early experiments have indicated.[8] It could drain resources away from children needing help in regular education but not covered under the definitions of the act. It could discourage referrals because of the complexity of their referral process and the potential exposure of the school, the teacher and its administrator to the view of "outsiders". The cost of services to the covered population could be such that, in a period of scarce resources and a shifting, sometimes declining tax base, services to non-covered populations could simply not be offered. To become a subset of special education could effectively limit the potential contribution of the school social worker to regular education.

These issues must be faced and grappled with over the next few

years. The coming years will need to be a period of enormous growth as the profession begins to assimilate a new model of practice and as a service-delivery system for handicapped children emerges. Hopefully, the service-delivery system will be a better one than that which is in existence and will lead the way to an increased awareness of the needs of all children, not simply those covered and defined in the present law.

FOOTNOTES

1. See Frederick Weintraub, Alan Abeson, Joseph Ballard, Martin L. LaVor, eds.,PUBLIC POLICY and the EDUCATION of EXCEPTIONAL CHILDREN, (Reston, Va: Council for Exceptional Children, 1977).

2. Wallace M. Lornell, "Public Schools and Delivery of Social Services or How to Use the Number Game" in Richard J. Anderson, Molly Freeman and Richard Edwards, eds., SCHOOL SOCIAL WORK and P.L. 94-142 discussed the involvement of the New York State Education Department with support of children in institutions.

3. Federal Register, Education of Handicapped Children, Tuesday, August 23, 1977, 121a.5.

4. See Richard Weatherly, "Securing a Future for School Social Work", Paper presented at the 1977 Annual Program Meeting of the Council on Social Work Education.

5. In many ways the history of social legislation in the 20th century has been one of implementation shortfall. The concept, as applied to educational legislation, is discussed in greater detail by Neal Gross, "Theoretical and Policy Implications of Case Study Findings about Federal Efforts to Improve Public Schools", ANNALS, American Association of Political and Social Science, November, 1977, 434 p. 71-87.

6. Brown vs Board of Education, 347 US 483 (1954).

7. Josephine Hayes, "Annual Goals and Short Term Objectives" Scotty Torres, ed., A PRIMER ON INDIVIDUALIZED EDUCATION PROGRAMS FOR HANDICAPPED CHILDREN, (Reston, Va.: Foundation for Exceptional Children, 1977).

8. op. cit., Weatherley.

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P.L. 94:142 THE PARENT, THE SCHOOL, AND THE COMMUNITY SERVICE AGENCY

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Shirley L. Porter

Public Law 94-142 guarantees the right of all handicapped children to an appropriate education. Involvement of parents in their child's educational planning is also mandated, including regular consultation. The many benefits gained through this parent participation are significant. A primary purpose for parent participation is to obtain essential information crucial to the study of the child in order to set educational and social goals compatible with the home. The parent is a unique source of pertinent information regarding the child and his difficulties. For educators to meet the child's needs he must be understood in the context of his family, its expectations and environment.

Parental participation aids in recognizing and understanding the child's difficulties and obviously it is important for parents and professionals to reach a mutual view of the child's problems so their efforts will be congruent. Parental impressions have special significance. To illustrate - observations of a child made during a home visit by a diagnostic team confirmed the mother's statement that the child was not so retarded as office testing had indicated.[1] However, in contrast, research shows many parental misconceptions regarding mental retardation still abound.[2] Obviously, this creates a paradoxical situation for the social worker, but regardless, parents can be helped to perceive ways the parent-child relationship is influencing the child's difficulties.[3] Further, there can be some alleviation of the unconsciously held attitudes which sometimes contribute to the continuation of problems.

Public Law 94-142 specifies several related services, one of which is social work consultation. Most evaluation teams include a social worker whose primary responsibility is working with parents during the evaluation process.

In this process the role of the school social worker should be centered on four main areas: information gathering, placement decision-making, dealing with parental attitudes towards evaluation, and creating a transition phase for the implementation of mutually set goals made by the parents, the school and related community services.

In gathering information, the social worker elicits all pertinent information from the parents and the school and begins to identify possible needed services and strategies. The social worker then helps the parent and the child to understand their role in the process and establishes a firm relationship with them in order for them to move smoothly through the evaluation process. As decisions are made, the social worker continually clarifies the goals of the parties involved, dealing with any unresolved feelings. For example, defensive behaviors may intensify, interfering with meeting the needs of the child. Hostility, may be directed toward either the school or the child himself, becoming a barrier to mutual goal-setting. Until such feelings are resolved, the parent may fail to utilize the school resources needed by the child.

The transition phase is especially important in seeking and securing parental involvement in the evaluation process because it is here that the social worker assists the parent and the school in planning continuing supportive services. It is at this point that community agencies such as mental health and family counseling may become directly involved in helping the parent, the school and the child on a long-term basis. Consequently, social workers from these agencies attend the interpretation conference, when appropriate, in order to explain their role in working with the child. Once the goals are agreed upon, the social workers from the supportive services make definite arrangements for their service with the parent and child. Thus, the transition phase is most important so that a smooth passage for the parent and child from the school evaluation process to the needed related services can be realized with the mutually set goals clearly in mind.

This collaboration of school and agency social workers can be enhanced by parental involvement in the educational planning for children. This involvement can occur in several areas. For example, early education of parents and children to the acceptance of individual differences, coordinated consultation with teachers and guidance counselors to promote early identification of children needing evaluation, coordinated screening to insure appropriately directed referrals and a smooth transition from evaluation to counseling are all aided by parental consultation.

Social group work aids the education of parents to the acceptance of individual differences. Meeting with other parents helps bring a realization that no one has a "perfect" child and that parental concerns are similar. Feelings of failure change to a sense of appreciating the childrens' uniqueness. Children also need assistance in accepting these individual difference. While parents can be helped through counseling and education to accept differences in their child, the social worker can also prevent the development of fears of being different by teaching young children positive attitudes about differences.

Contact between the professionals who evaluate and plan for "different" children and groups of "normal" kindergarten children

can be used to familiarize these children with differences. Scare words such as "retarded," "handicapped" and "mentally ill" become less frightening when explained to the children in terms they understand. For example, kindergartners listen very intently and ask pertinent questions when a mental health worker discusses going to a mental health center with the class. The children become interested in a place where they could be helped to "sit still more," or "not fight so much."

Another service community agency workers could offer would be to hold workshops clearly explaining characteristics of children which indicate referral to their agency. Teachers and guidance counselors often express a need for help in selecting the appropriate agency for referral of children. Such a workshop should also deal with how to approach parents with the need for service. When the teacher or guidance counselor is clear and positive about why the referral is being made, the referral can be initiated in such a manner that parents will view it as an effort to find the best possible educational plan for their child. When a case involves a seriously disturbed parent or one with deepseated misconceptions about handicaps, interpretation may be more difficult. However, to say a parent is too limited to understand why a referral is being made avoids necessary interpretation. The teacher could attempt to involve the parent, together with the social worker from the evaluation team or the appropriate community agency for an explanation concerning the referral.

Presently, schools make referrals to community service agencies, but only a small percentage of the parents actually contact these agencies. To increase the numbers of contacts, a community service agency could offer to participate in the annual orientation for parents of kindergarten children held in most schools. This meeting would be an ideal time for agency personnel who provide special services to school children to describe their agencies functions. Brochures could be made available to parents further explaining the agencies' services. Then parents whose children are referred to these agencies will move more comfortably into the counseling process because they have had previous contact with the school and agency representatives.

Public Law 94-142 mandates that counseling services be available to the child and his family when deemed appropriate. Counseling may be provided by a school or agency social worker, but the school social worker may find himself functioning more as a coordinator and integrator of services, monitoring the progress and changing the "Individualized Educational Plan" as necessary while the agency social worker increasingly provides long-term counseling. However, in either case counseling can offer a child help in building his self-esteem and in dealing with problems in his family and the school setting. It offers the parents a safe and accepting setting to express their feelings about their child. Also, further clarification and insight can be gained as to the implications of the evaluation enabling the parent to make realistic plans for his child. The parent can be helped

to accept the child with his limitations while helping the child to see himself as someone of value.

The intent of P.L. 94-142 is that the special child be given every opportunity to reach his fullest potential in the least restrictive environment possible. Related community services such as mental health and family counseling can play a key role in helping the child and his family by forming a close working relationship with evaluation teams and school social workers who are identifying the needs of the child in order for him to reach his fullest capabilities and to grow in his own unique way.

FOOTNOTES

1. Steele, S. "Who Knows Suzie?" NURSING OUTLOOK, (14), 64-65.

2. Wadsworth, H.G. and J.B. Wadsworth. "A Problem of Involvement with Parents of Mildly Retarded Children." FAMILY COORDINATOR (20:2), 141-147.

3. Cokin, M. Calligan and R. Ferrer. "Helping Parents in a Pediatric Clinic." CHILD WELFARE (50) 504-511.

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TRUANCY - DUE PROCESS: A CONTINUUM OF INFORMATION INTERVENTION, AND CONSEQUENCES

Adam Paikai
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Effective October 1, 1977, the Illinois Public Act 80-908 amended the Illinois School Code to define specifically valid causes for absence as well as chronic or habitual truancy. The act mandates that a school district maintain adequate records of a student's attendance and also delineates the responsibilities of the person who has parental custody or control over a student. It also obligates a school district to provide supportive services in cases of truancy.[1] The result of the act is the development of a due process procedure for truants. A student can not be labeled a truant and his parents can not be fined for contributing to his truancy by the Regional County Office or by the Truancy Court unless there is accountable and credible information proving that the student and/or the parent is responsible for the student's non-attendance.[2]

Assuming that truancy is a problem, how does a local school district in Illinois comply with the new due process procedures? During the 1977-78 school year, an Illinois high school addressed itself to its truancy problem by creating a program that provided both a method of intervention and consequences of truancy and a method of securing accountable and credible information. The school ombudsman and social worker, under the direction of the superintendent, through a study of 1976-77 suspension data (data based needs assessment), identified class cuts and all day truancies as the most frequent discipline problems faced by the deans.

The social worker and ombudsmen presented the needs assessment to a select group of teaching staff in order to share responsibility for the problem and to identify the target group that they would be committed to work with. Consequently, a truancy committee was formed consisting of about twenty-five faculty volunteers. The committee realized that it could not work with every student in trouble for cuts or truancies, therefore, they decided to focus attention on truants who were under the age of 16 and had been referred by the deans. Members of the committee assumed the role of advocates and worked with assigned students to try to motivate them to remain in school. If an advocate failed to motivate the student, he was responsible for advising the student and his parents to observe

the compulsory attendance laws. Consequently, immediate identification of truant behavior became crucial in order to follow up on the student. To facilitate identification, the discipline records of truants were changed from white to red folders with the advocate's name also placed on the folder. Then, when the deans met with an identified truant they contacted the advocate. To further insure consistent performance from the advocates, a procedural outline was developed.

TRUANCY COMMITTEE

Target Group: Students below the age of 16
(Rationale)

-early identification of truancy patterns
-extinguish inappropriate attendance patterns
-reinforce appropriate attendance patterns
-leverage of the juvenile court system

Chairperson:
(Responsibilities)

-assign referrals to advocates
-schedule committee follow-up meetings
-coordinate evaluation process
-liaison to dean's and attendance office
-set up red folders in dean's office that will identify advocate with student

Community Liaison Person:
(Responsibilities)

-coordinate community social service agencies
-coordinate support services with the local police agencies

Dean's Office:
(Responsibilites)

-refer students to truancy committee
-communicate with advocate when student is at the warning stage for suspension related to truancy, class cuts and tardies
-communicate with advocate in pursuing alternative to suspending truants

Attendance Office:
(Responsibilites)

-refer student to truancy committee
-when asked, provide attendance data for advocate

Computer Data Center:
(Responsibilities)

-help compile attendance data with chairperson to evaluate change in students' truancy patterns

Advocate:
(Responsibilities)

-consistent monitoring of students' attendance patterns (e.g., measure daily and/or weekly attendance)
-follow-up contact with student/parent at home or school when student has an unexcused absence or too many excused absences
-follow-up contact with student/parent when student has multiple class truancies and tardies
-consult with dean and provide alternative suspension programs
-supervise in-school suspension room
-contact community liaison person when local police agency needs to be involved
-take part in evaluation procedure after each nine-week quarter

During the first two months, advocates met regularly to discuss successes and failures. It became evident to the committee that advocate intervention alone could not alter the behavior of those students who were habitually truant. After subsequent meetings, an experimental in-school suspension program was designed and approved by the superintendent for implementation.

During the 1977-78 school year, the high school was on multiple shifts; juniors and seniors attended school from 7:30 to 11:50, freshmen and sophomores from 11:50 to 4:15. Consequently, advocates could now require truants to come to school in the morning for in-school suspension and attend their classes in the afternoon instead of losing a school day due to out-of-school suspension. However, a student could not be assigned to in-school suspension without the advocate meeting with the parents and explaining the program and securing signed parental consent and involvement.

The following data was compiled thru May 1978. Data was recorded by use of computer printout of attendance records and individual recordkeeping of student discipline records.

There has been improvement of attendance of 25 students due to advocate intervention coupled with in-school suspension.

25 STUDENTS BEFORE INTERVENTION	25 STUDENTS AFTER INTERVENTION
Compiled 301 days of truancy	Compiled 51 days of truancy
(Ratio of 5.90:1 decrease in truancy and increase of attendance)	
Averaged 12.04 days of truancy	Averaged 2.04 days of truancy

There has been a decrease in discipline referrals of 25 students due to advocate intevention coupled with in-school suspension.

25 STUDENTS BEFORE INTERVENTION	25 STUDENTS AFTER INTERVENTION
Compiled 333 discipline referrals	Compiled 103 discipline referrals
(Ratio of 3.23:1 decrease of dicipline referrals)	
Averaged 13.3 discipline referrals	Averaged 4.12 discipline referrals
(Ratio of 3.24:1 decrease of discipline referrals)	

Success of the program can be attributed to the existence of consequences consistent with the student's disruptive and truant behavior. In the early stages of the program, students purposely attempted to be caught for offenses such as smoking and classroom misconduct which previously resulted in out-of-school suspensions. However, students committing these offenses were also assigned to in-school suspension, and as the statistics above indicate, these other offenses along with truancy decreased.

The in-school program has been so successful with truants that it has been approved as an official school discipline procedure for the total student body next year. Since this new program will free advocates from supervision of the in-school suspension room, advocates should be able to follow up on more than one referral for truancy. With this increased time, the focus would also shift from remediation to prevention. Before the start of the new school year the change agents will obtain referrals from junior high feeder schools to identify potential truants. As soon as attendance problems are noted, the offender would be assigned an advocate.

One problem that faced the committee was that some students refused to attend in-school suspension and some parents refused to enforce their child's attendance. The committee decided then, to involve the county truant officers and local juvenile officers. When students or parents refused to cooperate with the in-school suspension program and with the compulsory attendance law, a referral was made to the county truant officer for court action and to the local juvenile officer for community follow up. In some cases, intervention by the juvenile officer with the student and/or parent improved cooperation tremendously. The involvement of local police agencies shifted some of the responsibility for truancy from school officials to other local agencies. Consequently, truants responded to the school's efforts because the school had gained an effective leverage that forced students to become responsible for their behavior. Prior to this integration of services, students felt they were responsible to no one, let alone the school. In other cases, students and parents were taken to court because of continuing truancy. There have been two cases in which the student and his parent were directed to appear in court. In both cases the student's advocate was also present in court and testified to the efforts made by the school before bringing the student to court. As a result, judges have dealt firmly with offenders. One set of parents who had exercised little authority over their son was given a conditional fine of $500 dependent upon their son's daily attendance. As a result of this action, the student's attendance and grades improved. Another

parent was told that she would be fined $100 a day and/or her daughter would be removed from the home if her attendance did not improve during the next month. As a result of this action, the parent sought private psychiatric counseling for her daughter.

With the establishment of an in-school suspension program and police/court/community agency referral procedures, the truancy committee created a system that provided both a method of accountable and credible information and a continuum of intervention and consequences. People, agencies and information build upon each other to provide intervention, consequences and due process to the identified truant. Initially, one begins with the student by providing a specific intervention and consequence. If the student does not respond, other people and agencies are integrated into the service program. As one progresses along the service continuum, information must be accurately recorded in order to receive an effective consequence from the court system, the final step in the intervention process. Utilizing a continuum of services and delivering consistent consequences provides leadership for other people and agencies to coordinate services to not only remediate, but also to prevent the growing problem of truancy.

FOOTNOTES

1. Illinois School Code: Chapter 122, Sections 26-2a, 26-3, 26-6, 26-8, 26-8a, 26-8b, 26-10, 26-12.

2. Illinois School Code: Chapter 122, Sections 26-10, 26-12.

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PLAY THERAPY: ISSUES FOR PRACTICE

Michael McGarrity

Since 1974, elementary students in the Santa Fe Public Schools have been receiving play therapy services provided by school social workers. Individual and small group play therapy programs have been developed and offered to selected children based on diagnostic assessments and treatment plans developed by the worker in conjunction with school personnel. The rationale for developing play therapy resources stemmed from two theoretical concepts: 1) the peer group exerts a significant influence on the experience of the latency-age child and 2) students will utilize services that are viewed as relevant to their needs.

The peer group and the school are different socializing experiences for children. As Norman Cameron points out, the school is a highly formalized setting that has little regard for kinship or previous friendship. Expectations such as orderliness, suppression of impulses, punctuality and task completion are stressed by schools. In peer groups, children function autonomouly, act spontaneously and interact according to common interests and personal skills.[1] While the child is expected to accept the formal values of the school, the peer group is never submerged or lost to the child. It remains a primary reference point for social interaction. Frequently, school personnel react to the students' peer group culture. That is, the reality of the peer group is perceived only when values conflict with the institutional standards. By recognizing the peer group as a force for positive self growth and development, school social workers can validate the child's social reality.

The involvement of the child in a peer group has an impact on school functioning for the individual student. Some children can move within the two experiences with relative ease. Other children can experience conflict between peer culture and school culture expectations. Additionally, situational disturbances in a child's peer group or school group can carry over. The boundaries between the two are fluid. Finally, while the school culture may be of primary importance to the adults within the system, adherance to the school values may not have the same meaning to students. Such a difference in values may or may not be regretable depending on the school.

In schools, social workers can provide services which are more acceptable to children and parents than the resources of community agencies. The services of the worker may be less disturbing or upsetting to parents because they are offered within the educational framework.[2] However, such a positive perception of school social work is not automatic, but can occur when attempts are made to provide relevant services acceptable to students. Often the goals in school social work practice have been advanced through the traditional services of casework, groupwork and, more recently, consultation. Such procedures can, by definition, limit relevant services to students. Also, a gradual erroding of positive regard by students regarding the social worker may occur as a traditional structure and schedule is imposed.

While casework, groupwork and consultation will continue to be primary school social work services, such services should be developed and offered with flexibility that takes into account the students' social and personal reality. Latency children seem motivated to solve problems within informal, friendly relationships and many elementary students seem to respond positively to activities geared to their interests. To stimulate childrens' motivation and engage them in the treatment process they can either be "indoctrinated" in the value of problem-solving skills via casework and groupwork or the childs' real interests can be used as a way to create a "laboratory" where immediate events are interacted with and resolved. With elementary age students the combination of interests, motivations and relevant activities creates an opportunity for positive change that is in the present.

The relationship between the students and social worker needs to be developed, whenever possible, informally, outside of a formal referral process.[3] Additionally, any treatment effort should be a mutually satisfying experience. While a parent may readily accept a social worker's involvement with a child as a way to improve grades or school performance, the child may not find meaning in such a goal unless it relates to his perceptions of his situation. The setting in which students are placed can have a large influence on their perceptions of social work services. The interaction promoted by the social worker can also effect the student's reaction to the social worker. In many cases, student resistance to treatment may be more a defense against process and setting than an indicator of a defense mechanism.

PLAY THERAPY PROCESS

No attempt will be made to discuss the various models of play therapy used by different practitioners. Generally, freedom of choice in activities is encouraged, while the worker can engage or disengage himself from the ongoing interaction and reactions. The feelings and behaviors of the children are discussed, underscored or interpreted by the worker. A major emphasis is to use the group to provide a mechanism for children to learn group and cooperative play in an

unstructured setting. Enjoyment of the experience is stressed in individual or small group settings so that the process of learning to cope or change can occur within a positive environment. The worker and child concentrate on the immediate reactions and feelings that are created by the play experience. Only rules about physical "acting out" are imposed. No one is allowed to hit the social worker in malice or take premeditated physical action against another.

In group play therapy sessions a strong effort is maintained by the worker to stress process interaction. Rather than serving as role models for impulse control or self-discipline, the worker attempts to clarify interaction, make observations and create opportunities for alternatives to behavior. The individual student or the group as a unit is encouraged to solve problems that arise within the group framework.

The worker's consistency in interacting with the children is considered of primary importance. Perhaps it is the most vital "modeling" function carried out by the worker. A tolerant, reasonable approach to issues which arise in sessions indicate to the children that situations which disrupt, upset or cause chaos can be resolved. Tolerant, reasonable consistent interaction can have a "settling" effect upon students confronted by their own feelings and the feelings directed at them by others. Affective issues are not denied but are made to seem manageable by how the worker responds to them as they occur. The consistency of the worker is of more importance than the arrangement of materials or equipment in the room. Without worker intervention many children in play therapy will develop rituals in the group or individual play therapy session: For example, certain games will be played in order, a special object may be made out of clay repeatedly or a particular bit of interaction will be developed at some time during each session by a child. If the group becomes a true "peer group" certain pecking orders will emerge and behaviors will surface which indicate that the worker's presence does not consitutute fearful authority. Rough house, rough langauage, teasing and behaviors usually reserved for places away from adult interruption will occur in the group.

The process of play therapy in schools creates some basic issues which require additional social work intervention. Because the group exists within the structure of the school it can have an impact on the classroom and conversely, the school or classroom can effect the group. Such cause and effect relationships are part of the reality of the group and while occuring outside of the group structure, should be considered part of the group experience. Simply put, the group is not over when the session ends.

FORMULATING THE GROUPS

Perhaps the least difficult element of offering play therapy services to children in schools is establishing the rationale for service. While teachers and administrators accept concepts which stress recognition of the peer group of the student, activities that are congruent to the

children's needs and socialization experiences, perhaps the most compelling argument for play therapy services may emerge from a teacher's or principal's concern regarding "acting out" problems by certain students. Disruption of classroom and playground activities is highly visable, rarely tolerated and can ultimately cause an adverse reaction by parents of children who are targets for aggressive, explosive peers. Consequently, "containment" of disruptive and violent children is a high priority in schools. Services that stress cooperative play experiences, behavior management and impluse control are eagerly accepted.

However, groups that are formulated to meet these behavior management objectives may become a problem for the worker. Implicitly the group comes into existence to correct behavior. The responsibility for positive outcomes becomes an ever-present burden. While it may require additional effort, group play therapy effectiveness can be enhanced if the social worker carefully articulates that the service should be offered to children who exhibit a range of problems from withdrawn to aggressive behavior. Peer group members should be included to promote heterogeneity for the group and to insure that the group does not operate in a contained, restricted manner.

In-service of teachers regarding play therapy concepts and processes is a way to orient staff to the benefits of the group experience. This is necessary because, in many ways group play therapy sessions run counter to the behavioral expectations found in the classroom and unless teachers are acquainted with the differences, there may be disparity in their perceptions of play therapy groups and the worker's role. In-service for teachers can consist of observation of a group session, which if carefully arranged, need not adversely effect group cohesiveness or process. Such "participant observation" should be followed-up with discussion and explanation to further clarify the process. In one particular elementary school, an alternative to actual observation was provided. This alternative consisted of presenting video tapes of several groups to teachers.

The single most important element of the observation or video presentation in-service is to expose the therapeutic process to the teaching staff and provide an opportunity to discuss the theory and practice base used by the worker. By creating visibility and sharing the process, the worker helps the faculty integrate the theoretical and the actual. The most important reaction to the observation of play therapy by teachers seemed to be the recognition of the emotional basis of behavior problems. Teachers watching a child hiding under a counter were able to correlate that scene with classroom passivity. In another sequence, teachers watched in amazement as a designated "trouble-maker" allowed himself to be roped and tied repeatedly in obvious enjoyment. His need for attention and the ways in which he sought to achieve that need were discussed actively by the group of teachers viewing the tape.

In each presentation, the tape was stopped when questions were

raised about a particular child or situation. Interestingly, the teachers felt that they had been exposed to an aspect of student behavior not seen before. In some instances, teachers admitted that they did not realize the extent of the behavior some children exhibited. It was as if the tape provided an amplification of behavior among the children and pointed out with greater clarity the relationship between emotion and behavior.

Teachers also questioned the interaction of the social worker. In one instance an issue was raised about allowing a "bullying" situation to continue without early intervention. In another sequence, a teacher questioned the validity of letting a student jump up and down on a desk top. Such questions allowed the worker to discuss techniques and theory used in the play therapy group experience. The most significant outcome, from the social worker's perspective, was that teachers realized that the play therapy experience was decidedly different from the classroom experience and that "behavior problems" were "managed" in a different process of interaction. By sharing the process and theory through the use of video tape, the worker was able to inform, discuss and display the reality of play therapy. In so doing, the worker helped to avoid the teachers' stereotyped perception of "behavior management" in the groups.

OPERATING PLAY THERAPY GROUPS IN SCHOOLS

There are a variety of issues that surface when group play therapy services are offered in schools. Initially, the worker discovered that creating a schedule for group sessions was similar to being a flight controller at an airport. With students moving from class to class in an interdepartmental setting, attending music, participating in resource room and reading programs and generally engaged in a typical variety of school activities, it becomes difficult to achieve schedules that are acceptable to everyone. Teachers jealously guard their time with students and there are usually a dozen valid reasons why a student cannot be released for play therapy sessions. (One important argument is that the child may be splintered between a half dozen special programs.) Fortunately, a team staffing approach had been developed to establish service priorities for children which made it possible for arrangements to be made. However, each student had to be scheduled for a group with a great deal of sensitivity to the teachers' needs.

As the group began and the members shared their enthusiasm for the groups with peers, students not enrolled began requesting entry into the groups. This became an issue of extreme importance since social worker credibility was at stake with many youngsters. To offset the possibility of rejection, the social worker organized some play activities with classes that had students in play therapy groups. In this way, along with careful explanation, most students did not feel left out. However, in some cases the worker was not "forgiven" by students who were not given membership in a group.

The issue of student interest in the groups had an adverse effect on

some teachers. One teacher did not like the idea that her children would rather "play" than work. Her message was clear: play therapy was simply a way to avoid school work. Indeed, the swing of student interest to "play groups" may have caused a feeling of abandonment for the teacher. Certainly, if students are provided the opportunity to engage in pleasurable activities at school they will do so with enthusiasm. However, it becomes important to be aware of the reaction this may cause in teachers, who are, after all, required to have students "work." Moreover, the members of the group can be placed in an uncomfortable position by a teacher's negative reaction to their participation. In some instances, the continuity of the group can be disturbed by a teacher's "forgetfulness" of schedules or the demand that a student remain behind to complete work. Pressure to "make up" work can confront the student upon return to class. The teacher-student interaction can give negative messages to students about participation in a group and create ambivalence for the student. Obviously, consulation with such teachers becomes a primary issue. This, of course, must be done after it becomes clear that the teacher's expectations are emotionally based and are less than reasonable. The attitude of the teacher and the goals of the worker must be adapted to remove stress from the student. In some cases it is a process of giving reassurance, while in other cases it becomes necessary to restate the goals and objectives. While a great deal of repetition may occur in this process, it still provides a way to keep the student out of a "double-bind" situation where he is responsive to the group experience but penalized for his therapy participation in the classroom.

Children in play therapy groups react to their experiences in differing ways. They often carry back to their classes their reactions, feelings and behaviors experienced in the group. There is no adjustment time after the group for them to integrate or diffuse the group experience. It became apparent, after comments by teachers and observation after group sessions by the social worker, that part of the group process needed to include an opportunity for the students to regain control, composure or achieve sufficient equalibrium to return to the school world. While the process of therapy may help a child explore feelings, experiment with behavior or react with others, the non-rational, emotive state evolved in the session is basically viewed as inappropriate in the classroom. It became apparent that the worker could inadvertently create a situation for students by not allowing them to regain behavior appropriate to the school setting.

Some students regress during their early involvement in play therapy groups, or because of certain group situations, they return to primary defenses that are not age appropriate. Even with an adjustment period incorporated into the groups, some emotional reactions were carried over to the class. Teachers noticed the disparity between groups designed to encourage social development and members who were acting "worse." To avoid blaming the group experience as the culprit, it was necessary to respond to such teacher concerns promptly and directly. Teachers were invited to discuss with

the worker reasons why a student's behavior might "worsen." these discussions centered on both theoretical and actual group dynamics. In the theoretical area, discussions were held about the psychological and emotional reactions children have to threatening thoughts, feelings or interaction. Defensiveness and regressiveness were examined as attempts to cope rather than as attempts to resist help. Interpretations of behavior were offered to encourage understanding by teachers of the child's emotive state.

In the discussion of actual group dynamics, attempts were made to explain what the causes of the regressive behavior were and how the child attempted to cope with his personal or social predicament. Some teachers, in spite of these sessions, felt that the group experience was counter-productive or the change in the student was not rapid enough to warrant continued involvement. The single most recommended alternative "therapy" in these cases was discipline. It was as if the expectation of worker "failure" was ample reason to justify basic punishment of the child.

ISSUES FOR PRACTICE

1. Play therapy services to children in schools must be developed so that they are congruent to the school world and the child's membership in that culture. The peer group and the school are two different cultural systems. It becomes essential for the social worker not to add to disequilibrium between the two systems but rather to engage in tasks that reduce tensions.
2. There is a danger that play therapy services will become only a label for behavior management and social control techniques. Because schools give high priority to social adjustment, the social worker must actively work to avoid giving the impression that the intent of play therapy is to control or correct behavior. The end result may be improved student behavior but the process is not one of student "management."
3. Play therapy services need to be clarified to school personnel so that a range of suitable candidates can be considered for group participation. Otherwise it can easily become a dumping ground for identified "troublemakers."
4. Professional practice requires that play therapy be demystified so that the process and theory are visible and related to each other. Teacher understanding and acceptance will be enhanced if in-service opportunities are provided and teachers are allowed to relate directly to the process. Such demystification of practice should apply to all of our basic service-giving in schools.
5. Teacher's negative attitudes or reactions regarding student participation in play therapy groups cannot go unattended. The process of adapting to the reaction of teachers and the value systems of the classroom which conflict with play therapy must be dealt with.
6. The social worker must realize that the student may carry the group experience back into the classroom and work to resolve the issues created as the child regresses, defends or attempts to bridge

the gap between the school and peer group. He must be aware of the larger setting of the school and avoid creating new "problems" for the child.

7. A positive acceptance and perception of a school social worker is desirable but not without potential difficulties and problems. As the worker provides services acceptable to children, care must be taken to insure that teachers do not create "double-binds" for students or perceive student involvement in social work services as abandonment or student rejection. A school social worker is rendered ineffective if access to students is limited or denied by the teacher.

8. Play thearpy services are a needed service for children on the one hand, but also exist as a potential rejection of the formalized school value system on the other hand. Planning must be carried out so that such services do exist and are not merely extensions of the school culture superimposed on a peer group setting.

9. Services for children in schools need to be developed so that there is a blend of practice skills by social workers relevant to children. Often casework and groupwork activities are viewed as the "real" services and socialization and peer group services as ancillary. Children may have the opposite perspective. It is the social worker's responsibility to sythesize skills for the benefit of children.

10. The need for social workers to quickly "fix" kids to meet the values of the teachers or the agenda of the school culture must be strongly resisted. Rather than feeding on the frustrations associated with such agendas, we must recognize that the school system can be modified and attitudes can be changed. However, such change will begin to occur only if we address the entire system of the school on a regular basis that attempts to transmit the values, knowledge and theory of social work practice and the reality of how children grow and develop.

No matter how social workers compartmentalize practice in schools, in reality each service offered requires skill and knowledge that goes beyond the boundaries of direct practice. Such is the nature of social work practice in the host educational setting of schools. Consequently, it becomes necessary for the social worker to direct his attention to organizational development. Objectives should be to 1) specify with clarity our goals and functions, 2) develop the capacity for staff consensus and understanding of our goals, 3) work congruently and flexibly with the school as a system and 4) attempt to achieve integration of social work goals with educational goals.[4] Such objectives require on-going planning and communication directed at the system as a whole and the groups that make up the system. It cannot be assumed that the values of social work and education are compatible in every situation. Nor can social workers always allow an accommodation to the prevailing attitudes within schools. Our value to schools may be found in the unique and special professional differences brought to the school setting to augment the total educational perspective.

FOOTNOTES

1. Cameron, Norman, PERSONALITY DEVELOPMENT AND PSYCHOPATHOLOGY. Boston: Houghton Mifflin & co., 1963.

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THRESHINGS

This section is devoted to authors' opinions and suggestions on the practice of school social work.

P.L. 94-142: BOON OR BUST

H. Frank Brull

When Public-Law 94:142 also known as the Education for All Handicapped Children Act first became known, the general reaction was a hopeful one. However, the time has come to look objectively at this piece of legislation designed "to insure that all handicapped children have available to them a free appropriate public education.[1] No goal could be more praiseworthy or more difficult. As President Ford said when he reluctantly signed the bill into law in 1975: "This bill promises more than the Federal Government can deliver. --Even its strongest supporters know as well I that they are falsely raising expectation by claiming authorization levels which are excessive and unrealistic". State Senator Arthur L. Berman of Illinois, the chairman of that chamber's Elementary and Secondary Education Committee said that while the goals of the Federal law were commendable "it verged on irresponsibility" to pass along to local districts the burden of implementing the law.

The expenditures demanded by this law are tremendous. A principle complexity is one of finance. One Illinois school district estimates it will need to spend an additional $388,000 in the next fiscal year to meet the requirements of the act. Another school district estimates an additional $350,000. So it goes from district to district. For the time being costs for the wealthier districts will be higher, as these districts have had a more sophisticated case identification process as well as more costly programs. But as George Adams, a regional superintendent for special education in Michigan, said: "We are finding kids faster than we can find competent staff." Utah has made an extra effort to identify such children and ended up classifying as handicapped almost 12% of all the pupils in the state.[2]

There are also questions of federal versus state control of education. New Mexico, speaking through its Superintendent of Public Instruction, feels that 94-142 is in effect federal control of education, rather than federal aid to education and, therefore, feels that "this legislation is not only a usurpation of each state's authority and prerogatives under the 10th Amendment of the United States Constitution but also represents the most restrictive piece of

education legislation in this country's history."[3]

Costs and legalities aside, the question still remains where is the money going to come from? The fact is it will not come to any large extent from federal taxes. As a practical matter, most of it is going to come from the local school budget. As everyone knows, local school budgets are in deep trouble; they are based on a regressive property tax, and property tax payers are in revolt. It seems unlikely that many districts will be able to pass referenda to finance education for the handicapped. Even if they could, the property tax seems a poor vehicle for financing such a program. This means that the money will have to be taken from programs for students who are not handicapped. With the country facing enormous needs, it seems poor public policy to skimp on those students who will play a vital part in the future of the country in favor of those who, at least, seem less likely to attain positions of leadership and influence.

It happens that the very category which causes the severe financial drain is, also, the group that school social workers are called on to serve. The law seems manageable when it mandates a free and adequate public education for the hard of hearing, deaf, speech impaired, visually handicapped, orthopedically impaired, other health impaired, deaf, blind, or those having specific learning disabilities.[4]

It is when the law reaches the seriously, emotionally disturbed that great financial problems arise. The cost for their care can be astronomical and it is for this very reason that health insurance contracts usually set limits on mental health coverage.

Public law 94-142 defines "seriously emotionally disturbed" in Paragraph 121 a.5, subparagraph (8).

> (i) The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects educational performance: (this is a strange definition of mental illness for it is certainly possible to be seriously emotionally disturbed and still be an adequate and on occasion superior student -- but the government thinks otherwise).
>
> (A) An inability to learn which can not be explained by intellectual, sensory or health factors (another poor definition as the reasons for an emotional inability to learn can be positively explained rather than by exclusion as this definition does).
>
> (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teacher.
>
> (C) Inappropriate types of behavior or feelings under normal circumstances.
>
> (D) A general pervasive mood of unhappiness or depression; or

(E) A tendency to develop physical symptoms or fears associated with personal or school problems.

(ii) The term includes children who are schizophrenic or autistic. The term does not include children who are socially malajusted, unless it is determined that they are seriously emotionally disturbed.

The first, and very understandable reaction of the schools has been to not recommend expensive treatment institutions, but to build off campus learning centers. The second has been to not recommend private psychotherapy. Recommendations made by schools are now being made with cost in mind, and not just the child's mental health. Clearly this does not always lead to the best plan for the child.

In Illinois, under the previous law, schools were held responsible for $2500.00 a year if a child went to a residential treatment center. The family could then go and seek help to finance the remainder whether from their own resources, or from the Department of Welfare or Mental Health. Private psychotherapy could be purchased, if necessary, from community supported agencies at a very low cost, based on the family's income, and sometimes private therapists offered reduced fees if that seemed necessary. Certainly neither the local family agency nor the private therapist is going to offer the school a reduced fee.

In effect, financial constraints will force schools to tell parents less than the full truth about their child. Further, in view of the fact that public money will be used in large amounts, expensive accountability procedures are required, procedures which will further absorb the federal financial contribution to such programs.

Financial problems aside, the next problem is whether the school is the best agency to take on the problems of the emotionally handicapped. Is a school, any school, in a position to arrive at a reasonable treatment plan for a child described as seriously emotionally disturbed? A school is and should be an educational institution devoted to learning. It is for this reason that the bottom line in any interdisciplinary staffing will be: can the student learn, will he pass, can he accumulate sufficient credits to succeed at this school. For the schizophrenic or autistic child and for the more severely impaired, the question of whether he can succeed educationally or not has little relevance. Sending this student to an off campus learning center--if it is indeed a learning center and not just a sham -- makes no sense whatsoever. Those children require intensive emotional care and whether or not they can learn should be secondary. Time may be lost from the learning process, but learning can be compensated for -- if the emotional problem has to some degree been conquered. To insist that educational performance be the criterion is to obfuscate the issue -- and will inevitably confuse diagnostic thinking and sensible mental health planning.

There is another aspect to the problem of diagnosis and planning. Simply put, the question is, who makes the diagnosis and the plan? If

the school is not able to make a sensible mental health plan parents can go to a psychotherapist privately and have him determine the diagnosis and treatment plan. When this happens is the school responsible for implementing this private plan? Certainly schools will resist such private incursions into the school budget, which can in turn lead to interminable hearings in which school and parent will unfortunately become adversaries. By the time such conflicts are settled, the welfare of the student will have been neglected for many months, and it is questionable whether his mental health needs can really be understood in a hearing that is essentially legal in its format and nature.

In Illinois it is now up to the legislature to revise the School Code so that it will be in compliance with the new law. In the case of a private school placement, everyone's interest would be better served if a formula could be found that would make the schools responsible for an amount equal to that which would have to be spent if the student could be educated within the district. Under such a formula the school would be freed from the pressure of keeping a student who cannot reasonably be expected to benefit from the district's programs while at the same time it would be free to make an honest diagnosis and suggest effective plans, and consequently the parents could decide on implementation. At the same time the parents would not be deprived of the educational cost benefit that would otherwise have accrued to their child. No simple or perfect formula for this will be found. Nevertheless, the idea seems like a reasonable guideline. In the absence of state legislation one high school has already taken a step in that direction by declaring that "room and board will not be funded under any circumstances."[5]

One thing is certain. Unless some acceptable compromise is reached, it is the handicapped who will suffer as schools adopt bureaucratic hurdles to save themselves from financial disaster.

FOOTNOTES

1. Federal Register, Department of Health Education and Welfare, Office of Education. EDUCATION HANDICAPPED CHILDREN. Implementation of Part B of the Education of the Handicapped Act. (August 23, 1977), part II.

2. NEW YORK TIMES. January 30, 1978.

3. De Layo, Leonard J. State Superintendent of Public Instruction. POSITION PAPER: PUBLIC LAW 94-142.

4. Federal Register, part II.

5. Strom, Joan, Director of Special Education. "Board Policy: Students attending private special education facilities." Northfield

Township High School District #225. Glenview, Illinois. March 30, 1978. (Mimeographed).

H. FRANK BRULL is chairperson of the school social work department New Trier Township High School West. He is a psychotherapist in private practice in Winnetka, Illinois. Mr. Brull has published several articles in ADOLESCENT PSYCHIATRY and PSYCHOTHERAPY: THEORY, RESEARCH AND PRACTICE and THE SCHOOL SOCIAL WORK JOURNAL.

EDITOR'S NOTE:

The concerns raised by Mr. Brull in relation to the financial obligation to provide special services for children through placement in private facilities has recently been clarified by the Illinois Legislature. Senate Bill 395, sponsored by Senator Arthur Burman was passed and signed into law August 25, 1978 by Governor Thompson. This act amends Section 14-7.02 of the Illinois "School Code" and includes the following provisions:

> ...the school district in which the child is a resident shall pay the actual cost of tuition for special education and related services provided during the regular school term and during the summer school term if the child's educational needs so require...
>
> No child shall be placed in a special education program pursuant to this section if the tuition cost for special education and related services increases more than 10 percent over the tuition cost for the previous school year or exceeds $4,500 per year unless such costs have been approved by the Governor's Purchased Care Review Board. The Governor's Purchased Care Review Board shall consist of the following persons, or their designees: the Directors of Children and Family Services, Mental Health and Developmental Disabilities, Public Health, Public Aid and the Bureau of the Budget; the State Superintendent of Education; and such other persons as the Governor may designate.

If a child has been placed in a program in which the actual cost of tuition for special education and related services excluding room, board and transportation costs, exceed $4,500 and such costs have been approved by the Review Board, the district shall pay such total costs which exceed $4,500. A district making such tuition payments in excess of $4,500 pursuant to this Section shall be responsible for an amount in excess of $4,500 equal to the district per capita tuition charge and shall be eligible for reimbursement from the State for the amount of such payments actually made in excess of the districts per capita tuition charge for students not receiving special education services.

TITLE XX OF THE SOCIAL SECURITY ACT: IMPLICATIONS FOR SCHOOL SOCIAL WORK PRACTICE

Barbara K. Hanna

School systems do not have direct access to social service funds. Therefore, if the school setting is to be promoted as a milieu for providing social work services, school social workers need to develop models within their existing systems that will qualify for funds. By understanding their systems, assessing the opportunities in the system and assuming responsibility for program development, school social workers can initiate the connection of specific needs with additional funds. The following information identifies the specific opportunities present in one system and describes the new model of service that was developed to match need with available funds.

Providing social services to children in the school setting by using Title XX funds creates service delivery conflicts and dilemmas. Schools generally have not even attempted to request Title XX funds for providing such services due to the problems encountered in developing a service delivery system that meets the need of the child, family and school, as well as Title XX requirements. Since the purpose of Title XX funds is to provide social services to specifically identified families, these funds cannot be used to meet educational costs or to provide services to children and families who do not qualify for Title XX services. Therefore, the issue of determining eligibility for services on the basis of Title XX guidelines rather than on needs identified by the school becomes a major issue in developing services. Remembering that the primary purpose of schools is the education of children, the question of how Title XX social services can be utilized in the educational process is raised.

In the Los Angeles city school system, the vehicle for connecting need, opportunity and new funding came through the expansion of the children center program. The childrens' center program provides day care for preschool children and extended day care for school-aged children whose ages are from two to twelve or to the sixth grade. These day care centers were already operated by the school district but were not federally subsidized. Since there are 87 childrens' centers serving 10,000 children in the Los Angeles city school system, this represents a sizable program which could benefit greatly by receiving additional funds. By definition under Title XX day care is a

social service making the district eligible to request funding.

In addition, California has been actively involved with child care and child development programs since 1943 when the Lanham Act was passed to provide child care for mothers working in defense plants. Subsidized child care has grown in the state since that time. Until recently, programs were funded and administered by different state agencies, i.e. Headstart, state preschool and day care who frequently had different goals and standards. However in August, 1972, the state passed legislation called the Child Development Act which consolidated all child development programs and placed them under the administration of the State Department of Education. This is a significant factor since most states administer subsidized day care through the social service system. This legislation charged the superintendent of public instruction to establish program standards for the delivery of child development services. In California the state requirements for day care services include compliance with the Federal Interagency Day Care Standards along with meeting Title XX goals and eligibility requirements.

The receipt of federal and state funding always is accompanied by additional program requirements, often vaguely stated. However, rather than waiting for services to be defined by others, social workers need to interpret the implementation guidelines creatively. Written interpretation of regulations most often evolve from the practices that are developed in the field. Therefore, general regulations can be defined functionally by initiating services because there is a considerable time lag before final written interpretations are available. Often this pro-active approach is crucial to the establishment of effective social work and mental health services.

It was in the early stages of implementing these program requirements that the mental health and social service component for children's centers was initiated. The task was to create a program that would provide services to the 87 centers and 10,000 children. With an initial staff of two pychiatric social workers, a six-month pilot program was begun in ten centers to explore the needs and learn more about the system being served. Attempting to provide direct service as a primary method was not practical. However taking the other extreme of simply providing a referral service to community agencies did not seem to be a responsible way of meeting the needs either.

The following fall the component became fully staffed with a program coordinator, five psychiatric social workers, a half-time psychologist, a child psychiatrist and nine paraprofessional social service aides to service the 87 centers. From the pilot program experience, it was clear that the overall need was to provide a support service for staff and parents to enhance their role as caretakers and teachers of children. The primary service delivery method that seemed to best meet the need and available resources was mental health consultation and education. The focus became prevention of social and emotional disorders through the development of direct and indirect services. Special emphasis was placed on enabling others to

work together for the benefit of the child. Involvement of significant people from the child's family, the center, the school and the community became critical to the success of services. Flexible services, designed to meet the specific needs identified at each site were developed within the following broadly defined areas:

1. Assistance to children and parents with special mental health and social service needs.

2. Development of parent mental health education activities.

3. Development of methods for early identification and plans for intervention to prevent mental and social disfunctioning.

4. Assistance to families and staff in utilizing the network of community agencies including coordination of the services provided by the various agencies.

5. Provision of in-service training for the staff to increase its knowledge and understanding of the social and emotional development of children and the adult's role in aiding healthy growth.

While using this model, there has been emphasis on developing a team process to identify needs and plan strategies for providing service. To this end the component staff meet together weekly. Some of the benefits gained from using the team process include: achieving a program format for the delivery of services, providing support and identity for individuals who work autonomously in the "host" system, using the group to solve practice issues encountered in the field and maintaining a relevant and responsive service.

The services provided by the mental health and social service component for children's centers are intricately woven into the varying aspects of the day care center's total program. To help individuals maximize their potential and to assist the system function positively are ends achieved through this social work service.

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RESOURCES FOR THE HEARING IMPAIRED

Sandra Abrams Butler

During the 1977-78 school year, I began a group for the parents of hearing impaired children in a local elementary school. The group met weekly in the evenings for six weeks. The first meeting was organizational in nature and we all shared our interests, needs, and expectations. From this meeting we coordinated a topic schedule for the five subsequent meetings. Some of the discussion topics included communication skills, future educational and career opportunities, and how we can best help our hearing impaired children.

As the group progressed, I investigated some of the many resources available to hearing impaired children and their parents. The parents and I found them to be very helpful and I hope others, who are involved with and interested in the hearing impaired, find these helpful.

NATIONAL ORGANIZATIONS AND THEIR STATE AND LOCAL AFFILIATES:

1. Alexander Graham Bell Association for the Deaf, Inc.
   3417 Volta Place, N.W.
   Washington, D.C. 20007

This organization provides various forms of information about the education of the hearing impaired and it promotes speech and speech reading. Its International Parents' Organization, located at 3417 Volta Place, N.W., Washington, D.C. 20007, has several Illinois Parent Organizations (local addresses may be obtained from the national office.) It also has information regarding THE VOLTA REVIEW magazine, a periodical that contains articles written by parents and educators regarding various aspects of deafness.

2. National Association of the Deaf (N.A.D.)
   814 Thayer Avenue
   Silver Springs, Maryland 20910

N.A.D. involves itself in many areas such as education, communication, health, legislation, rehabilitation, etc. It also has a helpful publications list each semester which includes books, posters,

kits, games about sing language, rehabilitation and research, that one can order. Its official publication is the DEAF AMERICAN. The Illinois Organization is located at the Illinois Association of the Deaf, c/o Mr. Lawrence Forestal, President, 1 South 250 Holyoke Lane, Villa Park, Illinois 60181.

3. Closer Look
   Box 1492
   Washington, D.C. 20013

Writing to the above address will get one a general pamphlet from the Special Education Information Center (SEIC) which is sponsored by the Bureau of Education for the Handicapped, Office of Education, U.S. Dept. of Health, Education, and Welfare. One can then obtain specific information about hearing impairments (or any other handicap of interest) by returning the coupon that is enclosed in the SEIC pamphlet and indicating the handicap and geographical location. The information packet includes a very thorough listing of relevant organizations that can be contacted in regards to all aspects of hearing impairments.

4. The American Speech and Hearing Association
   9030 Old Georgetown Road
   Washington, D.C. 20014

Through this association it is possible to obtain their national directory of clinical services, A GUIDE TO CLINICAL SERVICES IN SPEECH PATHOLOGY AND AUDIOLOGY and other relevant materials.

5. The John Tracy Clinic
   806 West Adams Boulevard
   Los Angeles, California 90007

This clinic has a "Correspondence Course for Parents of Preschool Deaf Children".

PUBLICATIONS

1. Coordinating Council for Handicapped Children
   407 South Dearborn
   Chicago, Illinois 60605

One can obtain information about "Your Rights as Parents of a Handicapped Child" and "Your Guide to Services for Handicapped Children".

2. Public Affairs Pamphlets
   381 Park Avenue, South
   New York, N.Y. 10016

The pamphlet entitled "HELPING THE CHILD WHO CANNOT HEAR" by Samuel Moffat offers valuable information about medical treatment, family relations, counseling, education, and where to seek help.

3. THE EXCEPTIONAL PARENT
   Psy-Ed. Corporation
   264 Beacon Street
   Boston, Massachusetts 02100

This periodical contains practical information for parents of handicapped children, and other information by parents and professionals. (6 publications yearly).

4. Systems O.N.E. Kit
   Educational Media Center
   207 Milton Bennion Hall
   University of Utah
   Salt Lake City, Utah 84112

This kit consists of nine filmstrips and tapes which provide an orientation to the integration of hearing impaired children into regular classrooms. It is valuable for parents, teachers, administrators, special educators and other interested groups. It was developed by the staff of "Project Need".

LOCAL RESOURCES

1. Department of Vocational Rehabilitation
   33 East Springfield
   Champaign, Illinois 61820

Information about vocational, recreational and educational opportunities and resources may be obtained.

2. Marsha Flaxman Kopp
   609 Swigart
   Champaign, IL 61820

A woman, who is hearing impaired, shared with our parent group some of her ideas, feelings, and experiences. She also discussed with us some of the articles her parents wrote regarding parenting of a hearing impaired child. Marsha was an inspiration to our group and she is interested in helping other parents and hearing impaired children.

3. Illinois Parents of the Hearing Impaired
   Jack McDonough - Chairman
   15434 Minerva
   Dolton, Illinois 60419

This state organization desseminates to local parent groups information including current legislation, lectures, conferences, etc.

it generally has four meetings each year and a State Day where parents of hearing impaired children can share ideas and experiences.

POST-SECONDARY EDUCATIONAL FACILITIES

1. National Technical Institute for the Deaf (NTID)
   Rochester Institute of Technology
   #1 Lomb-Memorial Drive
   Rochester, New York 14623

N.T.I.D. is a technical school for hearing impaired students interested in pursuing post-secondary technical training. It is connected with Rochester Institute of Technology.

2. Gallaudet College
   7th Street and Florida Avenue, North East
   Washington, D.C. 20002

This is a liberal arts college specifically for the deaf. A four-year liberal arts program as well as graduate studies are available.

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CONTEMPORARY ISSUES IN FEMALE ADOLESCENTS

Judith R. Millenson

Adolescence, as a recognized developmental stage, is a relatively recent phenomenon. There has always been puberty as a biological event but for most of history there was no adolescence as it is defined today. The social, economic and political changes in society have created a period of prolonged childhood and extended preparation for adulthood. Thus, adolescence has become a palpable fact for all young people between puberty and adulthood.

Society communicates numerous conflicting messages to adolescents. It wants young people to conform to certain expectations while excercising independent judgement, to delay sexual gratification while becoming warm, open, responsive people, to get along well in a group while being individualistic and competitive, to listen to adult advice but not be influenced by other people. Furthermore, parents want to feel the emotional satisfaction of being parents indefinately, while at a rational level they want their children to become self-sufficient human beings. Naturally, the adolescent reacts. He is subject to the discipline and supervision of childhood while being asked to assume the goal directedness and self concepts of adulthood and at the same time to delay the gratifications of adulthood. The paradox is that this is an era that puts a premium on youth, its appearance and its lifestyle and this circumstance may cause some young people to question whether becoming an adult is worth the struggle after all. Consequently, a major problem for contemporary adolescents is to interpret the expectations society has for them.

For girls, the conflicting messages multiply and become even more complex. At the very time a girl is experiencing a growing awareness of her sexuality, a growing desire for affirmation by her peers, paticularly boys, and a biological need to take care of and be cared for, these needs are depreciated by a society which is stressing academic competition, achievement and career development. Her mother, more often than not is a housewife who, even if working is primarily supplementing family income rather than finding personal fulfillment in a career. Naturally, the girl is confused about the role of her mother in particular and women in general. Could her mother wish to prevent her from securing the satisfactions of marriage? Does

her mother see the traditional role of women as devalued and unrewarding or does her mother so savor the status as mother that she would discourage new intimate alliances and the establishment of heterosexual relationships in order to guarantee the continuation of her role? Moreover the questioning of her mother's motives as well as the value of her mother's role may reinforce the disillusionment that began during latency thus heightening the conflict between mother and daughter. If the girl responds to the demands for high academic performance and ambitious career goals, she may identify with her father and deprecate her mother as well as her own feminine inclinations. However, while the theme song may be grades, college and career there is an inescapable refrain from family and society that identity as a woman is inextricably bound up with marriage and children, e.g. she may have a PHD. in Biology but does she have a husband? To further the ambivalence since female achievement is a relative novelty, the girl may sense that her professional attainments are not really a milestone in her struggle for identity and autonomy but more a status symbol for the family.

Yet another issue for the adolescent female is the evaluation of appropriate sexual behavior. The contemporary female adolescent receives a conflicting message in the communication between the society and the individual. The media, via entertainment and advertising, stress the relationship between female success or acceptability and physical attractiveness. Explicit TV shows and even more explicit movies and suggestive songs create the illusion that girls now have a sexual freedom that has traditionally been reserved for boys. But at home, most parents of daughters maintain a much stricter curfew for their girls than for their boys, are much more apt to restrict dating until some arbitrary age, (16), are much more concerned about parties being chaperoned and much more worried about their daughter's drinking too much, and so on. In reality, girls are indeed not as free as boys to express their sexual drive. How does a young girl make a decision regarding appropriate sexual behavior in a society that maintains at one level the equality of men and women but at another level sends the message that for boys having sex is as natural as liking sports, whereas for girls who involve themselves sexually, the outcome is to be called "sluts or whores".

The contemporary female adolescent's decisions and feelings regarding expression of her sexuality is further complicated by the increasing frequency with which she finds herself living with a divorced parent, more often than not, her mother. On the one hand the parent is expressing the traditional disapproval of premarital or promiscuous adolescent sexual intercourse while on the other hand the parent is once again dating, is possibly gone overnight, or evidences even less discretion in conducting a relationship. The question also arises, how does one identify with, or esteem a mother who has lost the valued male? If the young girl lives with her father, it is difficult for her to evaluate her attractiveness and desirability if her father is preoccupied with courting other attractive young women. A parent who is treated with contempt by the spouse or replaced as a

sexual partner by the spouse is unlikely to seem an object worthy of emulation and if such an identification should be made the other parent must be considered worthless or cruel. It is also difficult to invest in a meaningful relationship when it is obvious that perhaps no relationships are indestructible. Ironically, the latter perceptions often lead to casual non-committed relationships which inevitably fail and reinforce the validity of the observation that others cannot be trusted. In other cases, adolescents, particularly girls, become over invested in a peer relationship, seeking from it all the nurturing, reassurance and stability that would normally come from the parents, resulting again in disillusionment when the relationship cannot sustain the weight of the emotional demands.

There is yet another issue for contemporary female adolescents with which the entire society is struggling. At what precise point is a female no longer a child? When can she act on her own behalf and be independent of parental judgement or the approval of a spouse? Does taking responsibility for one's own behavior mean eschewing sexual relationships or does it mean taking responsibility for securing birth control information? What are the implications of legislation that requires a female minor to obtain the consent of parents to secure an abortion when it seems reasonable to assume that this would not be true if the same minor were married? Are females perceived as needing custody? Does the freedom to decide for oneself regarding birth control or abortion place a burden of decision for sexual behavior on the adolescent female for which she may not be ready?

In the public forum there is mounting concern with the equality of women as employees, as consumers and as individuals with legal status and there is an apparent relaxing of the restrictions by society on dress, social activity and general supervision. However, the contemporary adolescent is still struggling with the image of woman, an image that was at times idealized, at other times devalued and sometimes both simultaneously.

The contemporary female adolescent is expected to respect and idealize her mother, her grandmother and her aunts and, at the same time to be different. However, it is a struggle to try and develop an identity when there are few role models to emulate and, at the same time, to remain female while traditionally male attributes are the most extolled.

These issues--the changing life styles of the society as they effect females and the changing expectations "of" and "for" girls--have special significance for social workers delivering services to adolescents, particularly in a school setting. There is a challenge in helping a girl to reconcile her feminine qualities with her desires to achieve and compete in the career world; still another girl who adheres to the more traditional female role may need support in valuing homemaking and child rearing as legitimate goals in the face of the currently fashionable depreciation of these skills. Whether the social worker has the opportunity to work with the individual or not there is a need to be concerned with heightening the awareness of faculty and administration to these issues. This impact may be

reflected in course offerings, program planning, sports policy, career guidance and extra-curricular opportunities. The philosophy and attitude of the school can be a positive force in the resolution of the adolescent developmental crisis by communicating the need to value individuality and the creation of a life style to enhance personal worth.

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BOOK REVIEWS

EFFECTIVE CASEWORK PRACTICE: AN ECLECTIC APPROACH, Joel Fischer. McGraw-Hill Book Company, New York, 1978.

When Joel Fischer set out to write a book on effective casework, he faced a monumental task. There exists a long tradition of casework writing based on the psycho-dynamic approaches that forms the foundation of most practices. To this body of knowledge is added yearly problem-solving, client-centered and behavioral approaches which seek to find a place in the practice of social caseworkers. Joel Fischer's latest work is his attempt to organize these divergent systems of treatment into an effective system of service delivery. The work cuts across settings and could be applied in schools as well as elsewhere. This is achieved by establishing a framework that allows for evaluation and application based on a differential assessment of client needs. He states that he is not attempting to synthesize the various approaches, but rather to examine how each may be evaluated and validated for use with differing client population.

EFFECTIVE CASEWORK PRACTICES first establishes the value system which underlies casework approach. This is a reaffirmation of the traditional values as "a philosophy and value system centered on the worth and dignity of the individual; a commitment to countering the increasingly dehumanizing forces of modern society as they impinge upon the functioning of individuals;...a recognition that problems can be resolved through individualized services,...(p. 10)." These values are seen as the central core of casework and are distinct from the professional services which have grown up to implement them. Fischer argues that the practice of casework as done in schools, agencies and other settings is at best ineffective and can be demonstrated to be often harmful to the client.

What is called for is a "Feedback" system which would provide the caseworker with information on the effects of his practice and aid him in adjusting his methods to effectively service the client. This would then establish for the caseworker a method for evaluation of outcomes and a selection of methods based on the needs of clients. This ideal model for social caseworker's involves three of the basic concepts of scientific method i.e., assessment of need, intervention in the client system and evaluation of the effects of the intervention. Such a system should allow service delivery to be accountable to the

community, agency and the client.

The difficulties with such an approach to casework comes from an attempt to systemize the relationship between client and caseworker into one of "efficient" service delivery. The essential character of the caseworker relationship which transcends the methods utilized and the setting is the interaction between worker and client. This interaction often is not directly related to presenting problems of the client nor could behavioral objectives be written for every interview. The intangibles in the casework practice might be exemplified by the psychoanalyst Melanie Klein who wrote NARRATIVE OF THE CHILD ANALYSIS, 1961. She wrote of the difficulties in proving effectiveness, "endeavors to provide comparable exact data result in a pseudo-scientific approach, because the working of the unconscious mind, and the response of the psychoanalyst to them, cannot be submitted to measurement nor classified into rigid categories. For instance, a machine could only reproduce the active words spoken, without the accompaniment of facial expressions and movements. These intangible factors play an important part of the analysis as does the intuition of the analyst."

The value then, of EFFECTIVE CASE WORK PRACTICE lies in an insistence that school social workers and others who practice casework methods examine their practice and seek to find ways to further their effectiveness. Certainly this book can be of assistance in gathering empirical validation which can then be combined with experience.

Scientific research has a place in casework practice. As Jacob Bronowski in THE ASCENT OF MAN states, "...we are a scientific civilization. That means a civilization in which knowledge and its integrity are crucial. Science is only a Latin word for knowledge..."

KEN REID is a school social worker in Schaumberg, Illinois. Mr. Reid obtained an MSW from George Williams College and has since done coursework at The Chicago Institute for Psychoanalysis.

SOCIAL WORK SERVICES IN SCHOOLS: HISTORICAL PERSPECTIVES AND CURRENT DIRECTIONS, Lela Costin, National Association of Social Workers, 1978.

Lela Costin, Professor at the University of Illinois, Urbana and a leading author in school social work literature has written SOCIAL WORK SERVICES IN SCHOOLS: HISTORICAL PERSPECTIVES AND CURRENT DIRECTIONS. The work begins with school social work in the early 1900's and extends to a brief comment about the National Association of Social Worker's (NASW) school social work conference soon to be held in Denver (Spring, 1978).

In addition to a historical overview of school social work, the first portion of this work also examines educational issues on a more general scale. The view of public school education presented by Costin, of which a good part is taken from her previous writings, shows a realistic but negative view of education. According to Costin, the educational system reflects the normative values of society; a portion of which removes self direction from students, and drives children into sexist and racist roles.

This is followed by a brief discussion of how the conditions of today's society make the task of change agents more difficult and more important. Costin uses this premise to justify the use of a model of school social work practice that de-emphasizes direct services to students and parents and emphasizes the student's need for a successful interaction with his environment. This ecological model is seen as a preventive response to the social problems of today.

Costin then proceeds to outline four major school issues: the right to equal educational opportunity, the right to attend school, the right to an appropriate education and the issue of discipline in the school. Each issue is viewed from a comprehensive educational viewpoint including the legal decisions and background information needed.

The final portion of this work is what makes it worthwhile for the school social worker. It contains an overview of the previous models of school social work ranging from the traditional models to the systems models by Costin and Alderson. There is also a look at group work and other methods of practice not covered by the models specifically. In addition, for the first time there is an intelligent discussion of the recent NASW survey in a form other than the skeleton report issued by NASW. After a careful examination of that

survey, Costin discusses the findings of other recent studies, one conducted by Flynn in 1976 and another by Meares in 1977. She then synthesizes and interprets the findings.

An important interpretation of Costin is, that despite the call from the universities, all three surveys suggest that school social work models in use today are based upon the traditional models. The disparity between the theorists in school social work and the practitioners of school social work is indicated. Costin supports the premise that a change is needed, but points out that the new models do not seem to be utilized by the field.

In the concluding part of the publication, Costin mentions the new standards for school social work practice published by NASW. However, she does not discuss the standards in any depth and this like the question of the conflict between the model makers and the model users needs to be explored further.

This work is the second that deals specifically with school social work in NASW's Continuing Education Series. It is available from NASW, Publication Sales, Suite 600, 1525 H. Street, N.W. Washington, D.C. 20005, for $3.00. to make this publication a part of ones reading is well worth the time of every school social worker.

RANDY A FISHER is a school social worker for Mannheim Junior High School. He graduated with an MSW from the University of Illinois, Chicago Circle. Currently, Mr. Fisher is treasurer of the Illinois Association of School Social Workers.

FEDERAL LEGISLATION AND THE SCHOOL SOCIAL WORKER, Editor, Jeanne Everttts, National Association of Social Workers, 1978.

This book discusses recent, major pieces of legislation that have implication for school social workers. The first legislation discussed is Title I of the Elementary and Secondary Education Act (ESEA), passed in 1965. Although there have been several amendments passed since 1965, Title I remains basically an impetus for special services to low income children. The Emergency School Aid Act (ESAA) was enacted in 1972 and provides financial aid to newly desegregated school districts. PL 94-142, of particular significance was enacted in 1975. This bill provides federal assistance to states which adopt policies and procedures to provide full educational opportunities to handicapped children in the least restrictive environment. The final piece of legislation discussed is Title XX of the Social Security Act enacted in 1975.

In an addition to discussing these four major pieces of federal legislation, the book contains an example of at least one application of each of these funds as models for others. Reading these program examples makes evident the variety of competencies required to social workers to actively develop and participate in the implementation of these four pieces of legislation.

A simple list of these competencies is impressive without elaboration. Some of these competencies are: 1) knowing and evaluating legislative provisions; 2) skills in assessing individual, school and community needs; 3) awareness of social variables which contribute to under achievement; 4) ability to establish lines of communication to administration, family, community and child; 5) ability to recruit and organize volunteers; 6) ability to formulate measureable goals; 7) ability to develop a system for evaluating outcome; 8) ability to involve the community; 9) ability to work with and involve other social agencies; 10) skill in crisis techniques; 11) ability to deal with behavior problems; 12) ability to influence relationships between student and teacher, teacher and parent, parent and child, child and peer, etc.; 13) ability to organize and work with groups; 14) conducting classroom discussion; and 15) knowledge of organizational structure and ability to influence the climate of an organization.

The above list has implications both for the training and practice of school social work. For that reason alone this book is valuable to school social workers. Although some of the policy implications were not as clearly delineated as could be, it is helpful to have these major pieces of legislation and programs developed for their implementation together in a compact, single book. The examples of programs developed by the funds made available through these four pieces of legislation make this book important to all school social workers.

FEDERAL LEGISLATION AND THE SCHOOL SOCIAL WORKER is available at $3.00 per copy from NASW, Publications Sales, Suite 600, 1425 H. Street N.W. Washington D.C. 20005.

MARJORIE MCQUEEN MONKMAN is an associate professor at the University of Illinois, Urbana in the School of Social Work. Ms. Monkman teaches a doctoral seminar on interventions, has coordinated the university school social work program and will teach a course designed for school social work called, Intervention Strategies for Institutional Change.

THE BOOKFINDER: A GUIDE TO CHILDREN'S LITERATURE ABOUT THE NEEDS AND PROBLEMS OF YOUTH AGED 2-15, Sharon Spredermann, American Guidance Service, Inc. Circle Pines, Minnesota 55014.

THE BOOKFINDER is an excellent reference work for school social workers, counselors, teachers, librarians and parents. THE BOOKFINDER contains a listing of over 1,000 books for children and adolescents indexing them by author, subject and title. It includes such subjects as anger, anxiety, arguing, boasting, bullies, communication, death, divorce, doctors, emotions, fear, inferiority, moving, sharing and more.

To use THE BOOKFINDER, which has a special split-page format and binding, turn first to the Subject Index, the top part of the book. In the Subject Index are topics of interest with a list of titles and relevant age ranges. Then, for each related book, turn to the Annotation Section, the bottom part of THE BOOKFINDER. This section presents a brief summary of each book, the availability of the book in hard or soft cover, bibliographic data and any additional special information. A unique advantage of THE BOOKFINDER is the capacity of the Subject Index to remain open while one explores the book synopses in the Annotation Section.

The strengths of this reference work make it an obvious addition to any school. It provides quick access to many titles which may help explain or deal with feelings, problems and questions of youth. The synopses are concise and pertinent; the format is easy to use.

The only problem I have found in using this resource is that sometimes the school library does not contain the cited work. Several suggestions may alleviate this problem for future users and also encourage more affective literature in the school library. First, as one uses THE BOOKFINDER, notations should be made about books currently available so that the information is on hand. Second, a committee of school personnel should make recommendations for future additions to the school library. Third, perhaps in conjunction with city or area libraries, a master listing of books about the social-emotional needs of youth can be compiled. In addition, since over 450 topics are represented in THE BOOKFINDER, one or two could be chosen each month by grade levels or the whole school in an effort to increase awareness and understanding of affective education.

The availability of these books is of importance because children may feel encouraged by hearing a story about another child's experience of moving; they may try to understand the bully, or begin to talk about their feelings when these stories are read by or to them. For adults, THE BOOKFINDER may be useful for the parent who must try to explain death, divorce, adoption or other traumatic experiences to his child. THE BOOKFINDER can be the beginning of individual growth, of sharing between parent and a child or a stimulus for class discussion. More information and a descriptive brochure can be obtain[illegible]writing to the American Guidance Service, Inc.

NANCY FEYL CHAVKIN is a school social worker in Champaign, Illinois and also serves on the Illinois Office of Education's Pupil Personnel Services Advisory Board.

LIKING MYSELF and THE MOUSE, THE MONSTER AND ME, Pat Palmer, Impact Publishers, 1978.

We have been offered assertiveness training (AT) for adults, for women and for blacks, and now Impact Publishers offers us the first book on AT for children. Dr. Pat Palmer, Director of the Assertiveness Training Institute of Denver, has written two books in fulfilling the requirement for a doctorate degree in education from the University of North Colorado. LIKING MYSELF is for five to nine year-olds. THE MOUSE, THE MONSTER AND ME is for eight to twelve year-olds. These pocket-sized paperbacks are printed in large childish print, and are aptly illustrated with numerous and amusing red pen-and-ink drawings. They can be read aloud in about thirty minutes, but if the readers participate in the exercises which accompany the text (and this is certainly recommended), it will take much longer.

In LIKING MYSELF a child will be introduced to such concepts as: it's OK to show your feelings so long as you don't hurt others; it's OK to like yourself; mistakes you make should not be devastating to your self-esteem so long as you try to correct them and learn from them; it's OK for boys to cry – to name a few. These concepts are developed with warmth, at times humor and always with enthusiasm.

Much of the sixth (and last) chapter is devoted to a description of the nonassertive "pretzel person" who "tries to be liked by everyone." Note that there is very little space devoted to a description of the aggressive child who gets his needs met at the expense of others. I think the book would be more complete and better-balanced in AT terms had Dr. Palmer also introduced a character to illustrate this type of behavior.

This she certainly did in the sequel, as is obvious by its title. In THE MOUSE, THE MONSTER AND ME, Dr. Palmer invites children to recognize their strengths and powers, which may range from physical prowess to being a good listener. Other chapters illustrate how to say no, how to accept criticism, how to ask for what is wanted, how to give and receive compliments. Assertiveness is defined and becomes an attainable quality.

There is also a very clear message to parents and teachers in this book. It is that children have the right to be themselves and to help to

decide what responsibilities they are able to assume. Dr. Palmer alludes to the possibility that some adults may not want children to have this right of self-determination, but holds out the promise nonetheless that by being assertive "you can create your own lifestyle, beliefs and ways to act." I found this claim too simplistic. Moreover, it is unnecessary since the book has value without it.

Young and old will benefit from both these cheerful little books. The young will especially benefit, however, if the adult reading with them is neither "mouse" nor "monster."

NAOMI HODGMAN received her graduate training at Simmons College in Boston and the University of Illinois at Urbana where she obtained an MSW degree. She is currently a school social worker with the Champaign Unit IV Schools. Previously, Ms. Hodgman worked for the Red Cross Home Service in Boston and theChampaign County Family Service agency.

Book Notes

Bowe, Frank. HANDICAPPING AMERICA: BARRIERS TO DISABLED PEOPLE. New York: Harper & Row, 1978. About 36 million people have physical, mental and emotional disabilities and the United States further handicaps these disabled people. The author draws upon extensive evidence to make a strong case for building a barrier-free society. Additionally, the book contains an interesting chapter on educational barriers and listings of organizations of and for disabled persons and government programs for the disabled.

Cottle, Thomas J. BARRED FROM SCHOOL: TWO MILLION CHILDREN. Washington, D.C.: New Republic Books, 1978. This book is a report on the alarming numbers of children who are deprived of their educational rights and are not in school. Dr. Cottle's statistics take on a humanistic tone when he does in-depth interviews with these excluded children. The book also includes an extensive bibliography and a listing of childrens' rights organizations.

Ehrenberg, Otto and Miriam Ehrenberg. THE PSYCHOTHERAPY MAZE. New York: Holt, Rinehart, & Winston, 1977. This is a consumer's guide to the intracacies of therapy, whether to go or not, how to pick a therapist, how to make therapy work, how to terminate therapy, and much more.

Galinsky, Ellen and William H. Hooks. THE NEW EXTENDED FAMILY. Boston: Houghton-Mifflin,1977. The authors traveled across America looking at daycare centers. Many practical suggestions are included on how to select the right care for each child.

Galper, Miriam. CO-PARENTING: SHARING YOUR CHILD EQUALLY. Philadelphia, Pa.: Running Press, 1978. This is a source book for separated or divorced families offering an alternative to traditional child custody. The novelty of this plan is that both parents maintain a working relationship with each other for their children. The book describes scheduling, costs, and possible disagreements.

Greenberg, Selma. RIGHT FROM THE START. Boston: Houghton-Mifflin Co.,1978. This book is a guide to non-sexist childrearing, stressing the involvement of every aspect of family life. The author believes that both motherhood and fatherhood must be redefined if childrearing is to be a joyful experience.

Gross, Martin. THE PSYCHOLOGICAL SOCIETY. New York: Random House, 1978. This critical analysis looks at the growth use and misuse of psychiatry and psychology in the modern world. Calling modern psychology the new replacement for Judeo-Christian faith, Mr. Gross raises many interesting questions. School personnel might be particularly interested in his chapter "Freud in the Classroom."

Horejsi, John E., Thomas Walz, and Patrick R. Connoly, WORKING IN WELFARE: SURVIVAL THROUGH POSITIVE ACTION. Iowa City: Univ. of Iowa School of Social Work, 1977. This book is written from the perspective of the welfare worker. It speaks directly to the workers in the system and encourages them to act. Information presented here is from interviews across the country.

Lewis, Richard S. THE OTHER CHILD GROWS UP. New York: Times Books, 1977. The father of a brain-injured son, who is also the author of the award winning THE OTHER CHILD, gives a progress report for parents of children with learning disabilities. The book outlines the research and history of learning disabilities, including many case studies which give renewed hope for children with learning disabilities.

Rosenbaum, Jean and Veryl Rosenbaum. STEPPARENTING. Corte Madera, Calif.: Chandler and Sharp Publishers, Inc., 1977. This book is for those forty million Americans who have become instant stepparents. Following developmental stages of childhood, the book discusses many of the questions and anxieties that both children and adults have about the stepparent relationship. A helpful list of additional suggested reading is also included.

Wood, Sammellyn, Roger Bishop, and Davene Colern. PARENTING: FOUR PATTERNS IN CHILD REARING. New York: Hart Publishing Co., 1978. The authors contend there is not one right way to be a parent, but there is a way that is right for you. Four major patterns of parenting are delineated with specific problems and suggestions for each approach.

Books reviewed by Nancy Feyl Chavkin

FILM REVIEWS

In the closing essay of The Alan Guttmacher Institute publication 11 MILLION TEENAGERS, Daniel Callahan observes that "One of the main difficulties of being a teenager is sex, atonce a great discovery, a great mess, a great pleasure, a great frustration, and all around great muddle. We can't do much about that either, short of repealing the laws of human biology, which for some reason or other choose to introduce us to the subject before we have had a chance to figure out much about anything else". [1]

HUMAN BIRTH, GROWTH AND DEVELOPMENT: FACTS AND FEELINGS, written and produced by Barbara Martinsons, published by Warren Schloat Productions, Inc., Pleasantville, N.Y., 1970, is a group of six, 10 to 15 minute film strips that can be used individually or as a series. Each one is reviewed below.

"About Love: Beginnings" length-10 minutes. The development of feelings of love are traced from infancy through childhood into early adolesence and on to maturity. The narration stresses the changing nature of these feelings and states that "...a sense of joining which comes only when each has first been able to stand alone...doesn't just happen...it takes years to learn how to do it, to get yourself ready." The film strip stresses feelings, growth, personal change and the future without ever moralizing about sexual experience. She encourages thought, understanding and expression of feelings as part of self direction. The accompanying photographs are appropriate. This is an effective film strip for use with junior and senior high students who struggle with the feelings that parade under the banner of "love".

"Should You Or Shouldn't You? - And When" length-15 minutes. This film strip examines the problems of the physical expression of love. In clear terms the narrator talks about using others as "objects", exploitation, emotional pain, self-delusion and similar problems which arise when the question "What degree of intimacy is right for us?" is not considered before a couple becomes physically involved. As in the first film strip, the focus is on self-esteem and suggests that one must guard against the misuse of self, the misuse of self by others and the misuse of others by self. The narration ends with the caution "Your self-esteem and your feelings toward your date gives you the perspective by which you can determine whether

your physical lovemaking is appropriate. If you ever have the occasion to wonder 'is this right for me' - 'how far is too far' stop for just a moment and think! This film strip is an approach to any discussion of human values, interpersonal relationships and, specifically, the place of physical intimacy in the lives of adolescents. As before, the photography and sound complement the narration very well.

"The Miracle of Birth", 13 minutes, and "DNA and You", 15 minutes, are simply narrative descriptions of complex events. The film strip on birth (natural child birth) is included in the series to answer questions that for some students are still unanswered. It explains the basic process of conception and birth in a clear way and emphasizes the father's role in the delivery. It is consistent with the balance of the series. The presentation of the material on DNA, however, seems out of place and may have been included to encourage science teachers to view the package. For school social workers it is not a useful film strip. Nonetheless, if a social worker wished to use this series in a cooperative venture with the science or health faculty, it might be pertinent. Certainly, the film strip on birth would fit well into a program which included social work, science, health or family living.

"Sex: Problems and Possibilities" - 15 minutes. This film strip reviews various methods of contraception. The technique of presentation is a series of student questions answered by a teacher. The treatment of the subject is adequate, but the photographs are not as effective in this film strip as in the other. Conflicts over contraceptive use and religious values are mentioned but not treated in depth. The middle of the presentation deals with venereal diseases but unfortunately does not include herpes. Otherwise it is done well in a matter of fact way. The film strip concludes with a discussion of masturbation and a brief mention of homosexuality, principally, it seems, to reduce adolescent anxiety about close same-sex friendships. The discussion of mastrubation seeks to lessen the traditional attitudes of condemnation about masturbation and place it as a near-ubiquitous sexual outlet during adolescent years.

"The Times They Are A-Changing" runs 13 minutes, and though it is the last in the series it should probably be the first. It speaks to problems of sex-role stereotypes and changing sex-roles. Noting that we develop our first notions of sex-role from our parents, it goes on to emphasize the importance of peer groups and mass media in forming attitudes during adolescence. From this it questions how our own sense of our sexual roles influences our interpersonal relationships and our definitions of how we express love and fidelity. It is an ideal film strip to begin a discussion of identity and some of the forces that form our self concepts. The sound track includes appropriate music and the photography is well chosen.

As Daniel Callahan suggests, sex is introduced "...before we have

had a chance to figure out much about anything else". These film strips are useful as a beginning to help our students talk about things that they want to know.

FOOTNOTE

1. 11 MILLION TEENAGERS: WHAT CAN BE DONE ABOUT THE EPIDEMIC OF ADOLESCENT PREGNANCIES IN THE UNITED STATES. Planned Parenthood Federation of America, New York, N.Y. 1976. (Pamphlet)

Films reviewed by Ben Wheatley

Announcements

ERIC, the Educational Resource Information Center, has cited two articles in its June collection of RESEARCH IN EDUCATION (RIE) which orginally appeared in Volume One of the SCHOOL SOCIAL WORK JOURNAL. The articles cited are "A Framework for Effective Social Work Intervention in the Public Schools," by Marjorie McQueen Monkman which appeared in the Fall, 1976 issue and "Parental Counseling in Special Education." by Arlyn Mallman and Dennis Van Leare which appeared in the Spring, 1977 issue. RIE is a monthly publication of ERIC which lists articles of interest to educators. Each article is abstracted and can be obtained in micro fiche and hard copy through ERIC. The article by Monkman is found by ERIC identifying number ED 149202 and the Mallman-Van Leare article is ED 149203.

SCHOOL SOCIAL WORK JOURNAL

MANUSCRIPTS: Contributions are most welcome and may be submitted to the Editor, Jeanne Everttts, School Social Work Journal, P.O. Box #484, Naperville, Illinois 60540. Include the original and three copies. Dittoed or mimeographed copy is not acceptable. Please attach a vita of approximately seventy words. The author should retain a copy in case of loss through the mail.

Manuscripts will be reviewed anonymously by the editors and members of the Advisory Board. Authors will receive notification of acceptance. Articles not accepted will be returned. Please include a self addressed stamped envelope.

SUGGESTIONS TO CONTRIBUTORS: Articles should not exceed fifteen double spaced typewritten pages and should follow William G. Campbell, FORM AND STYLE IN THESIS WRITING, third edition. Articles should be applicable to social work in the schools. They may deal with school age children, with school staff, community, and with programs and research.

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